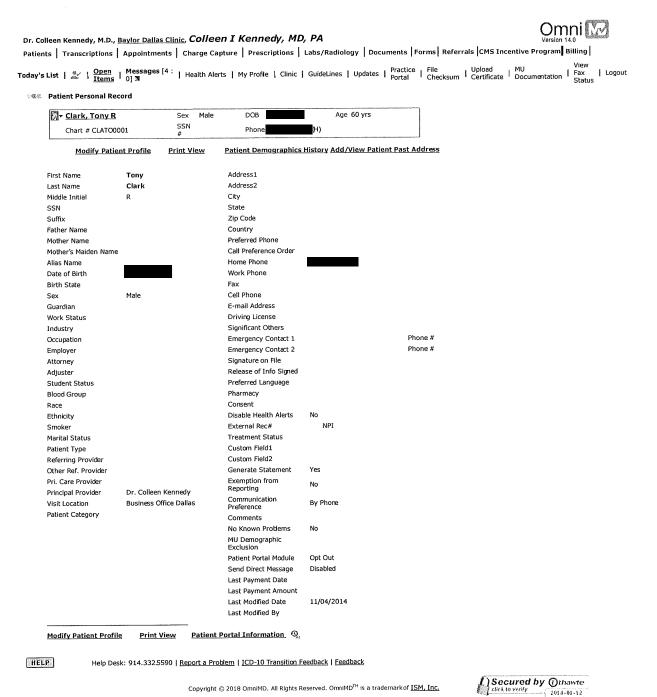
Dr. Colleen Kennedy, M.D., <u>Baylo</u>	or Dallas Clinic, Colle e	en I Kennedy, MD, PA		Omni Version 14.0	
		oture Prescriptions Labs/Radiology	Documents Forms Refere	als CMS Incentive Program Billin	g
day's List 💥 Open Me Items 0)	essages [4: Health Ale	rts My Profile Clinic GuideLines 1	Jpdates Practice File Portal Checksum	Upload MU Vie Certificate Documentation Fax Sta	
Ratient Dashboard					
Clark, Ton	Referring Pro	vider: vider:	<u>cord</u>		
	. Rec#: Unread Mess - Message				
Phone DOB	(H)		History	ectronic Notes ————————————————————————————————————	
hart # CLATOROO1 Age 60 yrs	Sex: Male rrint Last			enter Keyword	
atient's Primary Insurance	e Details				
	iroup / Plan	Member/ Subscriber	Validity Co-Pa	y Details Action	_
No Primary Insurance Record Exist					
Demographics	Allergies	OmniMD Rx History	Transcriptions	Messages	
Insurance Records	Current Medications	All Rx History	Referrals	CDA	
Eligibility Info	Medical History 🔻	Rx Refills	Form Records	Lock Users	
Advance Directives	Family History	Rx Change Requests	Scanned Documents	Super Bills	
Patient Confidentiality	Social History	Lab/Radiology Orders	Patient Flow Sheet	Patient Ledger	
Patient Annotations	Immunization	Lab/Radiology Test Resul	ts Active Problem List		
Patient Activity History	HIPAA Disclosure	Progress Report	Pending Immunizations	Patient Contact	
Incoming Referral File	Amendment	Patient Education v			
Patient Portal Information 0					
Billing Note					
ases and Visits				New Case/	/isit
Date of Service		•	ng Provider	Progress 🚹 👸 💮 Ad	ction
11/25/2013 0:00 AM-0:15 AM	MON .	AUTO			185
Patient's Recent and Upcor	ning Health Alerts			Add Health A	lert
Applicable Category	Health Alert		Status Action	Communication Type	
Patient's Future Appointme	ents			<u>P</u>	rint
Dt.of Service		Chief Complaint	Provider	Procedures	
				<u>Delete Pa</u>	tient
HELP Help Desk: 91	14.3325590 <u>Report a Pro</u>	blem ICD-10 Transition Feedback Feedba	i <u>ck</u>		
	G	© 2018 OmniMD. All Rights Reserved. OmniMD ^{TI}	is a trademark of ISM. Inc.	Secured by Othewre	**

GOVERNMENT EXHIBIT 607 4:18-CR-368 OmniMD - Physician Empowered » Patient Personal Record

Page 1 of 1



Patient Name	DOB	neth eastermore an et east transfer and a eastern free and a eastern f	Re	p #	TELEVISION AND METATERIZE THE CASE CASE CASE OF THE CASE CASE CASE CASE CASE CASE CASE CAS
TONY R. CLARK		,	The same of the sa	Insuranc	e Information
	ell Phone		Prov	vider MEDC	O
Address 9837 MERCER)z		Mer	nber ID#	Wasanibero)
City DA MAS	State	Zip 75228	SS#		
Allergies Norle Augustus and an annual an	Diagnosis	ursunt parau serauren an mannet (Bin	10014	Group # <i>U.H & 19 L T H</i>
•	Ridge Rd. Sult-775-1356 (in NPI)	Refills 1 2 3 4	wall, Ti 13-223	X 75087 31 (fax) Date	·
Psoriasis Cream Apply 1-2 grams to affect 4GMS8GMS120 Fluticasone 1%, Methylcobals	GMS Refills	1 2 3 4 5		D3 0.03%, Tretino	oin 0.012%
Eczema Cream Apply 1-2 grams to affect 4GMS8GMS _ <u>4</u> 120 Fluticasone 1%, Methylcobala	GMS Refills	1 2 3 4 5			
Pain Cream Apply one application (o 60GMS120GMS23 Flurbiprofen 20%, Baclofen 29	240GMS Re %, Cyclobenzapri	efills 1 2 3 4	5 (prñ 6%, Lido	S	r pain.

Visit Report - Clark, Tony R - 11/25/2013 0:00 AM(CST) (OmniMD)

Sex

Page 1 of 1

Patient : Clark, Tony R DOB Chart#: CLATO0001 Address:,,, Phone: (H), Ref By: DOS: 11/25/2013 0:00 AM(CST) (15 mins), Location: CIK Business Office Rockwall Chief Complaint: Attended By: Dr. Colleen Kennedy (214-775-1356) **Allergies** No Allergies Recorded.

: Male

Prescriptions and Lab Orders

Current Medications

Diagnoses

DIAGNOSES

Procedures

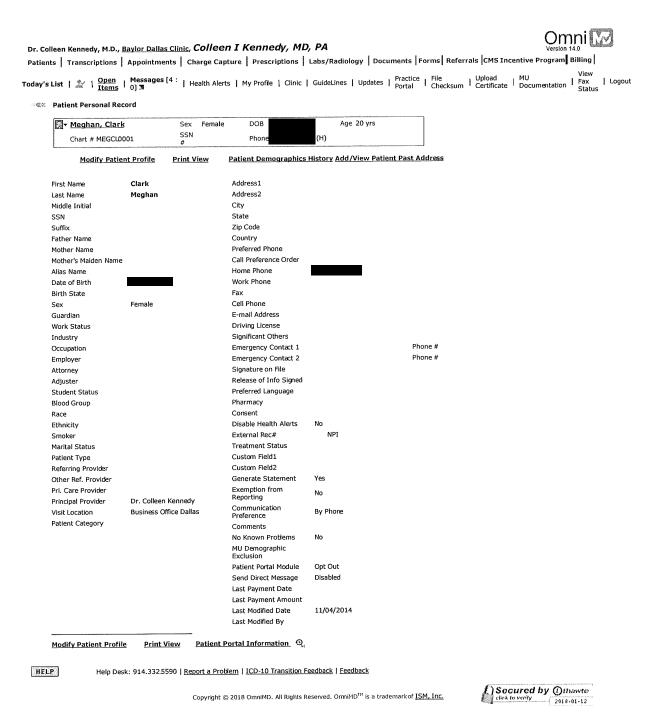
PROCEDURES

Patient Dashboard Meghan, Cla SSN # Ext. Re Phone DOB Chart # MEGCL0001 Age 20 yrs Pat. Due \$0.0 Print STMT. Patient's Primary Insurance D	Principal Prov Referring Prov Principal Prov Referring Prov Unread Messa (H) Sex: Female	My Profile Clinic Gi ider: Dr. Colleen Kenn vider: ider: iges:			Lecksum Upload MU Certificate Do	View
Patient Dashboard Meghan, Cla SSN # Ext. Re Phone DOB hart#MEGCL0001 Age 20 yrs Pat. Due \$0.0 Print STMT. Patient's Primary Insurance E	Ark Principal Prov Referring Pro Pri. Care Prov Unread Messa (H) Message A (H) Sex: Female Int Last	ider: Dr. Colleen Kenn vider: ider: sges: Alert		History	Certificate Do	cumentation Fax Status
SSN # Ext. Re Phone DOB hart#MEGCL0001 Age 20 yrs Pat. Due \$0.0 Print SIMI. atient's Primary Insurance E ayer / Policy Gro	Referring Pro Pri. Care Pri. Unread Messa (H) Sex: Female at Last Details	vider: ider: iges: Nert	edy <u>Health Record</u>		ν	<u></u>
SSN # Ext. Re Phone DOB hart#MEGCL0001 Age 20 yrs \$0.0 Print STMT. atient's Primary Insurance Eayer / Policy Gro	Referring Pro Pri. Care Pri. Unread Messa (H) Sex: Female at Last Details	vider: ider: iges: Nert	edy <u>nearth Record</u>		ν	
Phone DOB DOB art#MEGCL0001 Age 20 yrs Pat. Due \$0.0 Print STMT. atient's Primary Insurance E ayer / Policy Gro	(H) Sex: Female nt Last Details	Alert			ν	
nart#MEGCL0001 Age 20 yrs Pat. Due \$0.0 Prin STMT. atient's Primary Insurance E ayer / Policy Gro	Sex: Female nt Last Details	Memher / Subscriber			C	96
Pat. Due \$0.0 Prin STMT. atient's Primary Insurance E ayer / Policy Gro	nt <u>Last</u> Details	Memher / Subscriber		Edit	Enter Keyword	의
ayer / Policy Gro		Member / Subscriber				
	oup / Plan	IMember / Subscriber		L		Ia as
lo Primary Insurance Record Exist				Validity	Co-Pay Details	Action
Demographics /	Allergies	OmniMD Rx	History	Transcriptions	Messa	iges
Insurance Records	Current Medications	All Rx Histor	¥	Referrals	CDA	
Eligibility Info	Medical History <u>¥</u>	Rx Refills		Form Records	Lock I	<u>Jsers</u>
Advance Directives f	Family History	Rx Change R	equests	Scanned Docur	ments√ Super	· Bills
Patient Confidentiality 5	Social History	Lab/Radiolo	gy Orders	Patient Flow S	heet Patier	nt Ledger
Patient Annotations I	<u>Immunization</u>	Lab/Radiolog	gy Test Results	Active Problem	ı List	
Patient Activity History	HIPAA Disclosure	Progress Rep	ort	Pending Immu	nizations Patier	nt Contact
Incoming Referral File	Amendment	Patient Educ	ation_Ψ			
Patient Portal Information 9,						
Billing Note						
ases and Visits						New Case/Vi
ate of Service		Chief Complaint	Attending Pr	rovider	Progress	Acti
<u> 11/25/2013</u> 0:00 AM-0:15 AM N	MON		AUTO			<u> </u>
atient's Recent and Upcomir	ng Health Alerts					Add Health Ale
pplicable Category	Health Alert		Statu	ıs Ac	ction Commu	unication Type
atient's Future Appointment	ts					<u>Pri</u>
		Chief Complaint			rovider P	rocedures

GX607.005

OmniMD - Physician Empowered » Patient Personal Record

Page 1 of 1



https://www8.omnimd.com/servlet/PatientController?action=View&patientId=4B994E09-... 1/12/2018 CONFIDENTIAL KEN000209

Case 4:18-cr-00368 Document 533-66 Filed on 07/22/23 in TXSD Page 7 of 21

Visit Report - Meghan, Clark - 11/25/2013 0:00 AM(CST) (OmniMD)

Page 1 of 1

Patient: Meghan, Clark Sex: Female

Chart#: MEGCL0001 DOB:
Phone: (H), Address:,,,

Ref By:

DOS: 11/25/2013 0:00 AM(CST) (15 mins), Location: CIK Business Office Rockwall

Chief Complaint:

Attended By: Dr. Colleen Kennedy (214-775-1356)

Employer:

Allergies

No Allergies Recorded. **Current Medications**

Prescriptions and Lab Orders

Diagnoses

DIAGNOSES

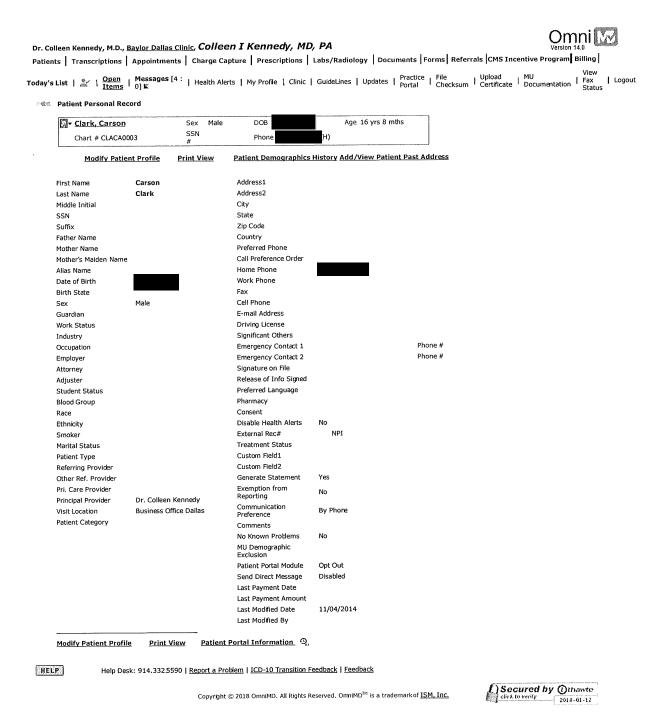
Procedures

PROCEDURES

	DO	В	Rep#	and the purpose of the following state (1992, 1974) (S.C., 1974) (A.C.,
M Λ 10.4				
MEGHAH M.			Insurance	e Information
ome Phone	Cell Phone		Provider からり	ີ ທ
ddress			Marabar ID #	
	Ta	T	200	
DALLAS	State	Zip 75228	SS#	•
llergies	Diagnosis		Bin #	Group#
MONE	erande states a como a como de sua servición y de como en enconerno de como en esta como en el como de como es	an neger and never solver is the removed and a contract of the	1 (410014	UHEALTH
gnatureScar Reduction Apply up to 4 G	MS twice daily for 10-		Date	125 13
	OGMS X240GMS nate 1%, Levocetirizine Dil		entoxifylline 0.05%, Priloca	ine 3%, Gabapentin 15%
Fluticasone Propior Psoriasis Crea	nate 1%, Levocetirizine Dil	nydrochloride 2%, Pe and the control of the state of the control o		ine 3%, Gabapentin 15%
Psoriasis Crea Apply 1-2 grams	nate 1%, Levocetirizine Dil a m to affected area 3-4 t	nydrochloride 2%, Pe neurochiochionis errochionis neurochiochionis imes daily.	entoxifylline 0.05%, Priloca	ine 3%, Gabapentin 15%
Psoriasis Crea Apply 1-2 grams 4GMS8GM	am to affected area 3-4 t	imes daily.	entoxifylline 0.05%, Priloca	
Psoriasis Crea Apply 1-2 grams 4GMS8GM	am to affected area 3-4 t	imes daily.	entoxifylline 0.05%, Priloca	
Psoriasis Crea Apply 1-2 grams4GMS8GN Fluticasone 1%, Me	am to affected area 3-4 t IS12GMS Refill http://cobalamin 0.042%, C	imes daily. Is 1 2 3 4 5 oenzyme Q10 2.4%,	entoxifylline 0.05%, Priloca	
Psoriasis Crea Apply 1-2 grams4GMS8GM Fluticasone 1%, Me Eczema Crear Apply 1-2 grams	am to affected area 3-4 t thylcobalamin 0.042%, C to affected area 3-4 t	imes daily. imes daily. imes daily. imes daily.	prn Vitamin D3 0.03%, Treting	
Psoriasis Crea Apply 1-2 grams4GMS8GM Fluticasone 1%, Me Eczema Crear Apply 1-2 grams4GMS8GM	am to affected area 3-4 t at 12GMS Refill athylcobalamin 0.042%, C athy	imes daily. limes daily. limes daily. limes daily. limes daily. limes daily.	prn Vitamin D3 0.03%, Treting	
Psoriasis Crea Apply 1-2 grams4GMS8GM Fluticasone 1%, Me Eczema Crear Apply 1-2 grams4GMS8GM	am to affected area 3-4 t thylcobalamin 0.042%, C to affected area 3-4 t	imes daily. limes daily. limes daily. limes daily. limes daily. limes daily.	prn Vitamin D3 0.03%, Treting	
Psoriasis Crea Apply 1-2 grams4GMS8GM Fluticasone 1%, Me Eczema Crear Apply 1-2 grams4GMS8GM	am to affected area 3-4 t at 12GMS Refill athylcobalamin 0.042%, C athy	imes daily. limes daily. limes daily. limes daily. limes daily. limes daily.	prn Vitamin D3 0.03%, Treting	
Psoriasis Crea Apply 1-2 grams4GMS8GM Fluticasone 1%, Me Eczema Crear Apply 1-2 grams4GMS8GM Fluticasone 1%, Me Pain Cream	to affected area 3-4 to affect	imes daily. Is 1 2 3 4 5 oenzyme Q10 2.4%, Is 1 2 3 4 5 () oenzyme Q10 2.4%, oenzyme Q10 2.4%,	prn Vitamin D3 0.03%, Treting	bin 0.012% Secretaria de la constanta de la c
Psoriasis Crea Apply 1-2 grams4GMS8GM Fluticasone 1%, Me Eczema Crear Apply 1-2 grams4GMS8GM Fluticasone 1%, Me Pain Cream Apply one applie	to affected area 3-4 to affect	imes daily. Is 1 2 3 4 5 oenzyme Q10 2.4%, Is 1 2 3 4 5 () oenzyme Q10 2.4%, oenzyme Q10 2.4%,	prn Vitamin D3 0.03%, Treting prn ones daily as needed for	oin 0.012% Secretaria de la constanta de la c

Page 1 of 1

and the second s	ricip besk, 52		right © 2018 OmniMD. A			markof ISM, Inc.	()Sec	ured by	() thawte	
Charts & Reports		t s 14.332.5590 <u>Report a</u>	a Problem ICD-10 Tr	ansition Feedback	Feedback				<u>Delet</u>	e Patient
Dt.of Service			Chief	Complaint			Provider	Proc	edures	
Patient's Futu	re Appointme	ents								Print
Applicable	Category	Health Alert			Stati	is i	Action	Communic		
Dationt's Boso	nt and Uncor	ming Health Alert	e						Add Heal	th Alert
(<u>) 11/25/2013</u>	0:00 AM-0:15 A	M MON			OTUA					52
Date of Service			Chief C	Complaint	Attending	Provider	Pr	ogress 🚹	Ů	Action
Cases and Visi			ar above to the control of the contr						New Ca	se/Visit
Billing Note	χ.									
Patient Portal In										
Patient Activity Incoming Refer		HIPAA Disclosure Amendment	3	Progress Repor		r chaing xinin	amegaons	<u>ratient C</u>	<u>ontact</u>	
Patient Annotat		Immunization	_	Lab/Radiology		Active Proble Pending Imm		Patient C	ontact	
Patient Confide	ntiality	Social History		Lab/Radiology		Patient Flow		Patient L	edger	
Advance Directi	ives	Family History		Rx Change Req		Scanned Doc		Super Bil		
Eligibility Info		Medical History	<u>Y</u>	Rx Refills		Form Records	-	Lock Use	<u>'s</u>	
Insurance Reco	rds	Current Medication	ons	All Rx History		Referrals		CDA		
Demographics		Allergies		OmniMD Rx His	tory	Transcription	<u>s</u>	Messages	i	
No Primary Insura	nce Record Exist									j
Payer / Policy		Group / Plan	Member/	Subscriber		Validity	Co-Pay Details		Actio	n
Patient's Prima	ary Insuranc	e Details								
Chart # CLACA0003		Print Last STMT.				Edit	Enter K	eyword]의8	
·	DOB	8 mths Sex: Male				Hist	ory		- 1	
	SSN # Ext Phone	. Rec#:	Message Alert				Electroni	c Notes		
		Pi	ri. Care Provider: nread Messages:							
	Clark, Car		rincipal Provider: I eferring Provider:	Or. Colleen Kenne	edy <u>Health Reco</u> r	<u>d</u>				
□ ≪ ≪ Patient D	ashboard								State	
oday's List 🎳	Open Me	essages [4 : Health	Alerts My Profile	Clinic GuideL	ines Updates	Practice File Portal Chec	ksum Upload Certificate	MU Document	View ation Fax Statu	Logou
atients Transc	riptions App	ointments Charge	Capture Prescrip	otions Labs/Ra	idiology Docu	ments Forms	Referrals CMS Inc	entive Prog		l
		or Dallas Clinic, Col				. 1- 1	, 1	V	ersion 14.0	etillaeldi
			llaan T Karra	4. MD D4				()mni	M



Patient Name	DOE	Beautiferent im Genetic and activities matter to something	Rep#	
CARSON R. CLARK			Insura	ance Information
Home Phone Cell	Phone		Provider M	c-DC0
Address			Member ID #	d tall servers
City DAILAS	State 7	Zip 7522.8	emparament	
Allergies NoNt	Diagnosis	khi ayon ma emir magang paga pamad appada a sepide seke khi k	Bin # 410014	Group # -7-04-6-4-1
•	775-1356 (NPI NPI (aily for 10-1	office) 214-0 Lic#: M7325 #: 150889781 4 weeks for sca	Date r reduction. (<i>Pracas</i>	-
Apply 1-2 grams to affected 4GMS8GMS12GN		•	prn	
Fluticasone 1%, Methylcobalam	in 0.042%, Co	enzyme Q10 2,4%	, Vitamin D3 0.03%, Tret	cinoin 0.012%
Eczema Cream Apply 1-2 grams to affected _4GMS _8GMS 🔏12GM Fluticasone 1%, Methylcobalami	IS Refills	1 2 3 4 5	pŕħ	
Pain Cream Apply one application (one60GMS120GMS240 Flurbiprofen 20%, Baclofen 2%, 0	OGMS Re Eyclobenzaprii	efills 1 2 3 4	5 prn 6%, Lidocaine 2.5%	for pain.

Visit Report - Clark, Carson - 11/25/2013 0:00 AM(CST) (OmniMD)

Page 1 of 1

Patient: Clark, Carson Sex: Male

Chart#: CLACA0003 DOB:
Phone: (H), Address:,,,
Ref By:

DOS: 11/25/2013 0:00 AM(CST) (15 mins), Location: CIK Business Office Rockwall

Chief Complaint:

Attended By: Dr. Colleen Kennedy (214-775-1356)

Employer:

Allergies

No Allergies Recorded. Current Medications

Prescriptions and Lab Orders

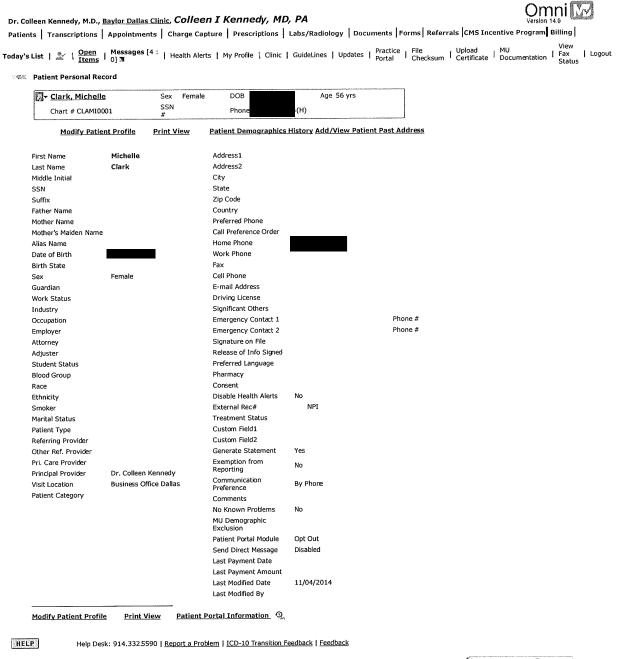
Diagnoses

DIAGNOSES

Procedures

PROCEDURES

Dr. Colleen Kennedy, M.D., <u>Ba</u>	ylor Dallas Clinic, C o	olleen .	I Kennedy, MD, PA	ı			Omni 🔀
Patients Transcriptions Ap	pointments Char	ge Captur	e Prescriptions Labs	'Radiology Do	cuments Forms	Referrals CMS Incentiv	e Program Billing
oday's List Open Items	Messages [4: Hea 0] 网	Ith Alerts	My Profile Clinic Guid	deLines Updates	s Practice File Portal Chec	ksum Upload MU Certificate Do	View cumentation Fax Log Status
Ratient Dashboard							
Clark, M	Refe Pri. (ipal Provid rring Provid Care Provid	der: der:	y <u>Health Record</u>			
SSN # Ex		ad Messag essage Al				1	
Phone DOB	(H)				History	Electronic Notes	
Ann F6.v	rs Sex: Female				instory		01
Chart # CLAMIUUU1 \$0.0	Print Last				Edit	Enter Keyword	
STM	I.						
Patient's Primary Insurar	ice Details						
Payer / Policy	Group / Plan		Member/ Subscriber		Validity	Co-Pay Details	Action
No Primary Insurance Record Exi	st						
Demographics	Allergies		OmniMD Rx Hi	story	Transcriptions	Messa	ges
Insurance Records	Current Medicat	ions	All Rx History		Referrals	CDA	
Eligibility Info	Medical History		Rx Refills		Form Records	Lock U	sers
Advance Directives	Family History		Rx Change Rec	iuests	Scanned Docume		
Patient Confidentiality	Social History		Lab/Radiology		Patient Flow She		t Ledger
Patient Annotations	Immunization		Lab/Radiology		Active Problem I		
Patient Activity History	HIPAA Disclosus	·e	Progress Repo		Pending Immuni		t Contact
Incoming Referral File	Amendment	_	Patient Educat	ion ₹			
Patient Portal Information							
Billing Note	- %.						
Cases and Visits				10.00			New Case/Visit
Date of Service			Chief Complaint	Attending Pi	rovider	Progress 🚹	
7.05/24/2016 0:00 AM-0:15	AM TUE			AUTO			Eta
<u>11/25/2013</u> 0:00 AM-0:15	AM MON			AUTO			PE
Patient's Recent and Upc	oming Health Ale	rts					Add Health Alert
Applicable Category	Health Aler			State	ıs Acti	on Commu	nication Type
Patient's Future Appointr	ments						<u>Print</u>
Dt.of Service			Chief Complaint		Prov	vider Pr	ocedures
	nents		Chief Complaint	ALANSAN MARINE M	Pro	/ider Pr	
HELP Help Desk:	914.332.5590 <u>Repor</u> t	a Problem	1 ICD-10 Transition Feedba	<u>:k Feedback</u>			
	Сор	yright © 20	118 OmniMD. All Rights Reserve	d. OmniMD TH is a tra	ademarkof <u>ISM, Inc.</u>	Secure	d by Othawte



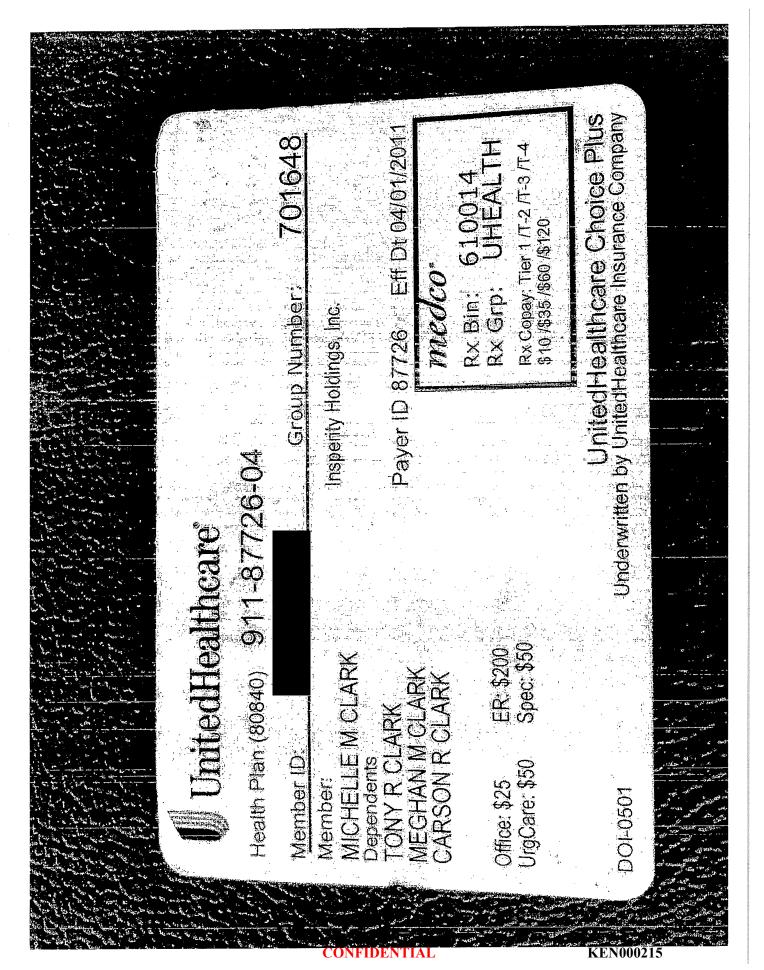
Copyright © 2018 OmnIMD. All Rights Reserved. OmnIMDTH is a trademarkof <u>ISM, Inc.</u>

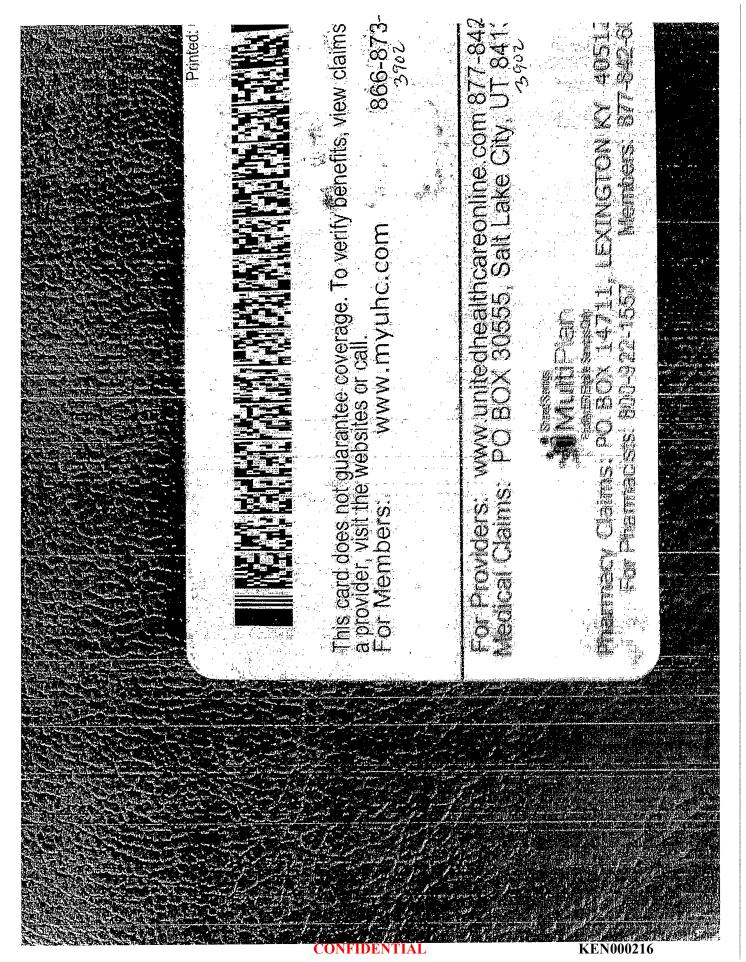
Secured by Othawte

Patient Name	DOB	Rep #
MICHELLE M. CLA	ork	Insurance Information
Home Phone	Cell Phone	Provider MrDCO
Address		Member ID #
City Dallas	State Zip 75228	SS #
Allergies Nom T	Diagnosis	Bin# Group# UHEALTH
Signature Scar Reduction Cre Apply up to 4 GMS twi60GMS120GMS	ce daily for 10-14 weeks for so	-613-2231 (fax) 10 Date 15 13 ar reduction. (<i>PracaSil™-Plus</i>)
Psoriasis Cream Apply 1-2 grams to affe4GMS8GMS1;	cted area 3-4 times daily. 2GMS Refills 1 2 3 4 5	prn
,	cted area 3-4 times daily. Refills 1 2 3 4 5 alamin 0.042%, Coenzyme Q10 2.4	
60GMS120GMS _ ×	one pump or 1-2 grams) 3-4 t 240GMS Refills 1 2 3 2%, Cyclobenzaprine 2%; Gabapent	

CONFIDENTIAL

KEN000214





Visit Report - Clark, Michelle - 11/25/2013 0:00 AM(CST) (OmniMD)

Page 1 of 1

Patient: Clark, Michelle Sex: Female

Chart#: CLAMI0001 DOB:
Phone: (H), Address:,,,
Ref By:

DOS: 11/25/2013 0:00 AM(CST) (15 mins), Location: CIK Business Office Rockwall

Chief Complaint:

Attended By: Dr. Colleen Kennedy (214-775-1356)

Employer:

Allergies

No Allergies Recorded. Current Medications

Prescriptions and Lab Orders

Diagnoses

DIAGNOSES

Procedures

PROCEDURES

Patient Name	DOB DOB	Rep #	Towns of the same
Michelle M. CL	ARK	Insurance Information	Transport
Home Phone	Cell Phone	Provider Mr DEO	THE STREET
Address		Member ID #	- que estados
City DALLAS	State Zip 75228	SS #	
Allergies Nont	Diagnosis	Bin# Group# UHEALTH	Z Committee of the comm
Signature Scar Reduction Cr Apply up to 4 GMS tw60GMS120GMS	vice daily for 10-14 weeks for sc 	tkwall, TX 75087 -613-2231 (fax) 10 Date 15 13 Car reduction. (<i>PracaSil™-Plus</i>)	5%
Psoriasis Cream	and the second s	-	1
, , , , , , , , , , , , , , , , , , , ,	ected area 3-4 times daily. 12GMS Refills 1 2 3 4 5	5 prn	and the property of the proper
	palamin 0.042%, Coenzyme Q10 2.4	0/ 1/2 - 1 DD 0/000/ T - / 1 - 0/ 0/100/	ا [[محمد معتدد
_4GMS_8GMS X	ected area 3-4 times daily. 12GMS Refills 1 2 3 4 5 palamin 0.042%, Coenzyme Q10 2.4		TO LET THE PARTY OF THE PARTY O
Pain Cream	AND CONTROL HELBERT OF THE REAL PROPERTY OF THE PROPERTY OF TH	nu diversa est con inscripció com com en destra de diversa de medical de la competitación de la competitación d	Marie Control
	(one pump or 1-2 grams) 3-4 t <u>×</u> 240GMS Refills 1 2 3		Automotive
	2%, Cyclobenzaprine 2%; Gabapent		· Stranger
		Chandra de la constante de la	101.2011VI

CONFIDENTIAL

Visit Report - Clark, Michelle - 11/25/2013 0:00 AM(CST) (OmniMD)

Page 1 of 1

DOS: 11/25/2013 0:00 AM(CST) (15 mins), Location: CIK Business Office Rockwall

Chief Complaint:

Attended By: Dr. Colleen Kennedy (214-775-1356)

Employer:

Allergies

No Allergies Recorded. Current Medications

Prescriptions and Lab Orders

Diagnoses

DIAGNOSES

Procedures

PROCEDURES

Visit Report - Clark, Michelle - 05/24/2016 0:00 AM(CST) (OmniMD)

Page 1 of 1

Patient : Clark, Michelle Sex : Female

Chart# : CLAMI0001 DOB : 08/13/1961

Phone : 214-789-1176(H),

Address:,,,

Ref By:

DOS: 05/24/2016 0:00 AM(CST) (15 mins), Location: CIK Business Office Rockwall

Chief Complaint:

Attended By: Dr. Colleen Kennedy (214-775-1356)

Employer:

Allergies

No Allergies Recorded.

Current Medications

Prescriptions and Lab Orders

Diagnoses

DIAGNOSES

Procedures

PROCEDURES